

**NHS DORSET CLINICAL COMMISSIONING GROUP**  
**GOVERNING BODY MEETING**  
**LOOKED AFTER CHILDRENS ANNUAL HEALTH REPORT**  
**EXECUTIVE SUMMARY**

<b>Date of the meeting</b>	20/07/2016
<b>Author</b>	P J Earney Designated Nurse for Looked After Children
<b>Sponsoring Board Member</b>	Dr P Blick, Locality Chair for Bournemouth and Named GP for Safeguarding
<b>Purpose of Report</b>	To provide a summary of the annual report on services being commissioned for Looked After Children, current trends, and outcomes for all children accommodated in Dorset.
<b>Recommendation</b>	The Governing Body is asked to <b>note</b> the report
<b>Stakeholder Engagement</b>	The Designated Nurse is working closely with all providers, young people and partner stakeholders, in reviewing and monitoring current services commissioned are safe, effective, caring, responsive and well-led to meet the health needs of children accommodated in Dorset.
<b>Previous GB / Committee/s, Dates</b>	N/A

**Monitoring and Assurance Summary**

<b>This report links to the following Strategic Principles</b>	<ul style="list-style-type: none"> <li>• Services designed around people</li> <li>• Preventing ill health and reducing inequalities</li> <li>• Sustainable healthcare services</li> <li>• Care closer to home</li> </ul>		
	<b>Yes</b> [e.g. ✓]	<b>Any action required?</b>	
		<b>Yes</b> Detail in report	<b>No</b>
All three Domains of Quality (Safety, Quality, Patient Experience)	✓		
Board Assurance Framework Risk Register	✓		
Budgetary Impact			✓
Legal/Regulatory	✓		
People/Staff	✓		
Financial/Value for Money/Sustainability	✓		
Information Management & Technology			✓
Equality Impact Assessment			✓

# 9.9

Freedom of Information			✓
<b>I confirm that I have considered the implications of this report on each of the matters above, as indicated</b>	✓		

Initials : PE

## 1. Introduction

- 1.1 This summary report is to give assurance to the Governing Body that the CCG is meeting its statutory requirements in commissioning services which are safe, effective, caring, responsive and well-led in identifying and meeting the health needs of the Looked after Children (LAC) population of Dorset. The report covers the period from 1 April 2015 to 31 March 2016.
- 1.2 The full annual report can be found on the website/Board Portal (see Appendix A) and the reader is encouraged to view to gain a full understanding of the current commissioning arrangements, the health needs and outcomes for Dorset children in care, the action plans and priorities.

## 2. National and Local Drivers for LAC

- 2.1 The national and regional focus for LAC and care leavers has been identified as a main area for improvement for NHS England during 2016/17. Both the children's Safeguarding Boards in Dorset have also identified LAC and care leavers as a priority area to improve outcomes and reduce vulnerability.
- 2.2 The Justice Lowell Goddard Inquiry commenced in July 2015, the focus is to identify how organisations fulfil their responsibilities to protect children. This will include how LAC and care leavers have been protected during their journey through the care system including a focus on how their psychological well-being and mental health has been supported and met. Interim reports will be produced as the inquiry proceeds with the final report expected in 2025.
- 2.3 The Queen's speech on 26th May 2016 made a promise of a new Children and Social Work Bill: with an extension to the right to a Personal Adviser, someone who will make sure care leavers receive the support they need as they transition into adulthood, to all who want one up to the age of 25, currently it is up to 21 years of age. CCG increased investment to existing providers is now in place to meet the health element of this change.
- 2.4 The Children's Commissioner for England has published the "Lightning Review" (May 2016) in response to Health Committee House of Commons inquiry into Mental Health support for young people. This inquiry identified current mental health provision is not meeting the complex mental health needs of this vulnerable group. LAC and care leavers are reported as being five times more likely to attempt suicide than their peers, more likely to enter the criminal justice system with 23% of adult prisoners having been in care. The Pan Dorset Children and Young People Emotional Well-being and Mental Health Strategy recognises the complexity and increased need for specialist dedicated support for LAC as a vulnerable group who have experienced trauma, abuse and or neglect.
- 2.5 From April 2016 CQC inspections commenced to assess local area effectiveness in identifying and meeting the needs of children and young people who have special educational needs and/or disabilities (SEND) under section 20 of the Children's Act. The CCG Quality and Delivery leads have met and agreed a process to follow when the CCG receives notification of an inspection. Given that two thirds of LAC is identified as having SEND status there will be a focus on the effectiveness of services commissioned for meeting the health needs of this cohort within LAC.

### 3. Governance and Quality Assurance

- 3.1 There has been a clear LAC work plan within the Quality Directorate of the CCG, this has been maintained and reviewed monthly by the Designated Nurse with areas for action, time frames and outcomes reported to the Directors Performance, Quality Group, Audit and Quality Committee and the Governing Body meetings.
- 3.2 In November 2015 the CCG received a Care Quality Commission (CQC) review of its commissioned services for Children Looked After and Safeguarding within the Dorset County Council Area only.
- 3.3 The inspectors recognised the positive practice of the CCG with the provision of a dedicated Designated Nurse for LAC; they judged the role to be facilitating the development of an effective three way partnership between health commissioners, social care and the health provider with the establishment of a robust performance management framework. However, it recommended that all agencies needed to take ownership and work together to effect real change.
- 3.4 The review process was rigorous and findings presented a mixed picture of the provider's response to LAC. Areas of positive practice were identified in General Practice, where Inspectors reported seeing some exemplary practice for LAC. There were areas of good practice and areas for improvement noted for the CCG, Dorset Health Care and Dorset County Hospital. The Final Report was received in January and an action plan developed and overseen by the Director of Nursing and Quality. This has informed the CCG, health providers and DCC LAC and Care Leavers work plans for the 2016/17.
- 3.5 Many of the areas recommended for improvement had already been identified within the CCG with associated risks being flagged through the organisation reporting and escalation policies. The CCG acknowledged and responded positively to the business case put forward during 2015 identifying current commissioning investment was not meeting their regulatory responsibility. The recommended workforce profile put forward in line with statutory guidance was agreed with increased investment being made available.
- 3.6 The commissioning programme lead and the Designated Nurse as clinical advisor are in the process of meeting with Dorset HealthCare University NHS Foundation Trust (DHC) to revise the LAC specification and reporting schedules to ensure robust scrutiny and monitoring is in place. Health providers commissioned by Dorset CCG to deliver services for LAC were reviewed and agreed contract variations were implemented in April 2015. These included revised activity and performance indicators and for the first time quality schedules. Sessions were completed with the leadership teams, to give guidance to how the schedules would provide the mechanism for monitoring performance to report back through the CCG review contract meetings.
- 3.7 For 2015/16 Pan Dorset LAC health annual reports covering all three Local Authorities, have been produced by the nursing and medical advisors and presented to the Designated Nurse and Doctor to give an overview of population, performance of service and to inform evidence of good practice, key achievements, challenges and developments for 2016/17. The full annual report available on the governing Body portal gives a breakdown on the reporting activity, performance and health outcomes for LAC and care leavers as they journey through the care system, achievements and objectives for the Looked after Children services going forward.

#### 4. Joint Working with Local Authorities within Dorset

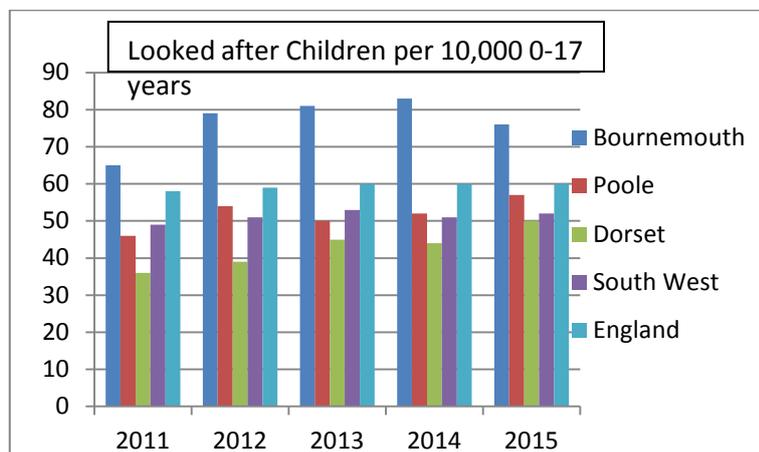
- 4.1 The Designated Nurse has forged successful professional relationships with all strategic leads of the three Local Authorities for Looked after Children, and sits on the Corporate Parenting Boards for each authority. This has resulted in partnership working on service planning, strategy, commissioning of Looked after Children and Care Leavers provision across the county.
- 4.2 The Designated Nurse attends LAC and Care Leavers strategic groups within the three local authorities, and the LSCB and DSCB acting as the CCG health panel member for Serious Case Reviews where the child involved has LAC status. This has helped to embed health focus as part of the child's overall care plan and inform CCG commissioners of areas of good practice or need for development. Health performance data is shared with all three local authorities.
- 4.3 Child Sexual Exploitation; National reviews and reports such as; the Independent Inquiry into Child Sexual Exploitation in Rotherham - Baroness Jay (August 2014) and the Oxford SRC Reports (March 2015) have all recognised that LAC are particularly vulnerable to falling victim to exploitation and feature as a cohort in significant numbers in these reports.
- 4.4 This has also been reflected locally with 25% of LAC being at risk of CSE; unlike in other areas, Dorset has not uncovered large criminal gangs or groups operating to sexually exploit young people. The Dorset profile identifies individuals or pairs of perpetrators having targeted local children's homes in Bournemouth and Dorset.
- 4.5 Over the last six months the Pan Dorset CSE/Missing and Trafficked Subgroup has received CSE and Missing data reports from the three Local Authorities (LAs). These show that at the end of Quarter 4 a total of 340 children were considered to be at risk of CSE, and of those 84 (25%) were LAC. Where Children were reported as having gone missing from home the total number was reported as 314 and of these 137 (44%) were LAC.
- 4.6 The Designated Nurse for LAC now attends the Pan Dorset CSE/Missing and Trafficked Strategic Group. It is anticipated that, with the right questions being posed to the multiagency group, data collected can be used to carry out analysis to inform health trends and impact for LAC during 2016/17.
- 4.7 The monitoring and tracking of LAC placed out of the County by their accommodating local authority, or LAC placed in Dorset by other local authorities has continued through the CCG Notification Process implemented in June 2015. This enables the Designated Nurse of behalf of the CCG to carry out and meet its statutory requirements to ensure that any changes in healthcare providers does not disrupt the objective of providing high quality, timely health care for the child or young person.
- 4.8 In February 2016 Dorset County Council had a Joint Ofsted Inspection of its Children's Services. The report was published on the 23 May 2016 stating that Services for LAC required Improvement.
- 4.9 The report acknowledged that there has been historic poor performance and slow progress in improving the provision of initial and review health assessments for LAC. The report acknowledged significant improvements to systems, had led to rapid yet very recent progress. For example, January 2016 figures for initial health assessments increased from 20% to 70% in quarter three of 2015 and, for review health assessments, from 50% in December 2015 to 78% in January 2016. This means that children looked after are receiving more timely health assessments to address their health needs.

4.10 Since the inspection performance has varied, partnership working to monitor continues to remain a focus for the CCG to see the percentage increase and sustain improvement above 70% month on month with aspirations to move performance to above 90%. The clinical and safeguarding risk to Dorset CCG due to inability of the commissioned Provider to medically assess all newly identified Looked after Children within the statutory 28-day timeframe has reduced significantly. It is anticipated with improved performance being sustained from April 2016 this issue may be taken off the CCG risk register.

## 5. National and Local Profile of Looked After Children

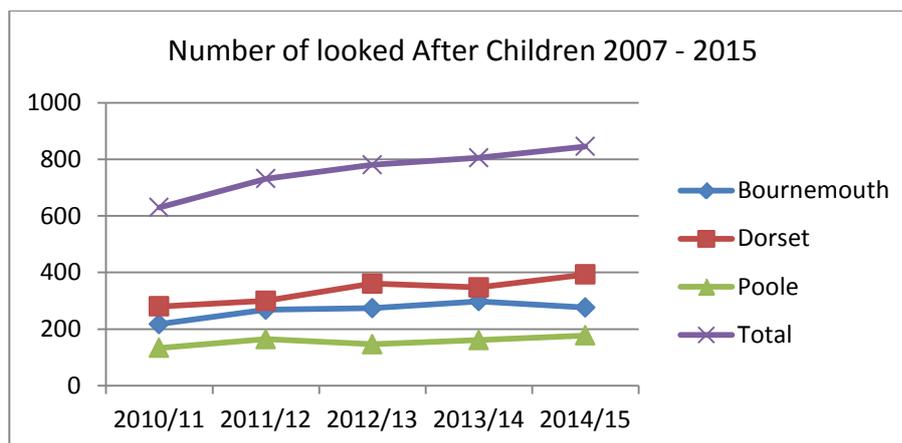
5.1 Nationally there were 69,540 looked after children at 31 March 2015, an increase of 1% compared to 31 March 2014 and an increase of 6% compared to 31 March 2011. This compares to a 9% increase between 31 March 2014 and 31 March 2015 and a 47 % increase from 31 March 2011 and 31 March 2016 across Bournemouth, Dorset and Poole.

5.2 The Graph below compares the local, regional and national picture from 2010 to 31 March 2015.



5.3 Nationally the number of looked after children has increased steadily over the past seven years and is expected to continue, the same trend is visible across Dorset. Locally Between 1st April 2015 and the 31 March 2016 Dorset (West and East) has seen the largest increase in its numbers from 393 to 485 (23%). Poole have seen a slight increase from 177 to 179 (1%) and Bournemouth have seen a slight decrease from 276 to 261 (-5%) In the last five years there has been an overall 47% rise Pan Dorset. With a 76% increase since the service was originally commissioned.

5.4 Graph 2. Continuation of rising trends of Looked after Children accommodated Pan Dorset.



- 5.5 Bournemouth, Poole and Dorset local authorities are also net importers of children placed within their areas by other local authorities across England and Wales. As of 31 March 2015 an additional 309 children have been notified to the CCG as being placed within the county, the change in the statutory guidance in March 2015 also recommends the need for specialist health service to be provided to Care Leavers up to age of 21 (357) and young people who have SEND status up to the age of 25 (47) bringing the overall cohort of LAC in need of Specialist Looked After Health provision to 1,639.

## 6. Performance of Commissioned Health Providers for Looked After Children Services

- 6.1 Poole Hospital NHS Foundation Trust (PHFT) delivers the medical services for Looked after Children. This includes the Designated Doctor for LAC who works closely with the Designated Nurse in supporting the health agenda for LAC.
- 6.2 Initial Health Assessments Statutory Guidance requires that each child new into care should have an Initial Health Assessment (IHA), which must include a health plan that is available in time for the first statutory review by an Independent Reviewing Officer. The statutory time frame is 20 working days from when the child is accommodated. The performance indicator set has not been achieved, however clear rationale to why this has not been possible has been evidenced within the full report.
- 6.3 Table 1. Timeliness of IHAs completed 2015/16

	<b>Bournemouth</b>	<b>Dorset</b>	<b>Poole</b>	<b>Pan Dorset</b>
<b>Children new into care</b>	117	273	90	480
<b>Initial Health Assessment Completed</b>	98 (84%)	223 (82%)	65 (72%)	386 (80%)
<b>IHA completed in 20 working days</b>	91 (90%)	65 (28%)	50 (70%)	207 (51%)

- 6.4 Half of children starting to be looked after in the three local authorities had their IHA completed in a timely manner. This is an improvement from 34% of children new into care in 2014/15. The number of Dorset children having an IHA in timely manner in the year 2015/16 has increased to 65; however, because of the increase in the total number of children new into care the percentage has only increased from 20% to

28%. Close partnership monitoring continues with anticipated sustained improved by September 2016.

- 6.5 Pan Dorset 480 children started to be looked after and 386 children had IHAs. Thirty-nine children left care before 20 working days and so did not have an IHA. In Bournemouth five LAC refused to have an IHA and were referred to the LAC Nurse for an early Review Health Assessment (RHA). It is not clear from the data available if the Poole and Dorset children who did not have an IHA were referred for early RHAs, as per local policy and is an area for improvement during 2016/17.
- 6.6 Dorset HealthCare (DHC) is commissioned to deliver services to all LAC and Care Leavers. The agreed key performance target for the completion of Review Health assessments is 90%. The table below for 2015/2016 shows an inconsistency in achieving this target across the County. This key performance target has not been achieved Pan-Dorset (83%). This is reported as being attributed to insufficient staff resource, changes in staffing including maternity leave, staff sickness and staff vacancies, late returns of RHAs completed out of area. In comparison to 2014/15 the total completion rate Pan Dorset has increased marginally from 78% to 83.5%.
- 6.7 Table 2. Key Performance Indicators for 2015/16.

LAC KPI's 2015/16	Target	Bournemouth Total	Poole Total	Dorset Total	Pan Dorset Total
RHA	90%	81%	87%	65%	83%
Immunisations	85%	81%	92%	64%	78%
Dental Checks	80%	81%	91%	64%	76%

- 6.8 Quality Assurance; There is a statutory responsibility for health providers to Quality Assure (QA) health assessments completed. Poole Hospital has been more robust in Quality Assuring IHA's, there was a dip for IHA's in quarter 3, the causative factor was quickly identified and corrected, see full report for detail. The response by Dorset Health Care (DHC) has been lower, the reason given has been lack of nursing capacity. With the recently increase in investment to DHC this will be a focus within their quality schedules, quarterly reporting has already been requested by the Designated Nurse.
- 6.9 Health Outcomes for Dorset Looked after Children are reported within the annual report. There will be a key focus to work with Dorset Healthcare for a more robust health outcome analysis to inform health trends and commissioning arrangements. A key focus within the increased investment made by the CCG will be to ensure the gap identified in meeting LAC and care leavers emotional and mental health is bridged. Clear indicators to robustly monitor will be set within DHC revised contract arrangements.

## 7. Key LAC CCG Developments 2015/16

- 7.1 A full review of services commissioned has been completed. The medical services provided by Poole Hospital are within the recommended WTE caseload capacity to meet the demand for Initial Health Assessments, fostering and adoption requirements. The CCG have agreed further investment into the Specialist Nursing

Service provided by Dorset HealthCare (DHC) as current provision is significantly under the recommended guidance.

- 7.2 Medical Services have been decommissioned from Dorset County Hospital to form a Pan Dorset Service from Poole Hospital. This is now fully embedded offering a sustainable high quality medical service. Sessions are delivered at different locations across the County to provide equity of access for all LAC and their carers.
- 7.3 Voice of Looked after Children and Care Leavers. The Designated Nurse completed six consultation events from January to March 2016 with young people in care and Care Leavers to seek their views of specialist health services available and/or delivered. Overall the feedback was very positive and a strong message came through that young people in care and those now left value the specialist health provision commissioned in helping to support and meet their health needs.
- 7.4 CCG Notification System for LAC being placed outside their 'originating' CCG. Development has continued over the last year in mapping and tracking LAC placed outside Dorset to monitor they are receiving health support without delay.
- 7.5 Serious Case Reviews. The Designated Nurse now represents the CCG for LAC at the LSCB and DSCB Boards and sub groups and takes the lead for Serious Case Reviews (SCR) involving LAC. There is currently one SCR S23 under review due to be completed in November 2016.
- 7.6 Mental Capacity Act (MCA) for 16-18 years. Joint work is being completed with the CCG Adult Safeguarding Lead and the Pan Dorset MCA Team DCC, to deliver bespoke training through four half day events. This is to cover all health professionals Pan Dorset working with the above age group including LAC on the specific implications of the MCA for young people transitioning to adult services.
- 7.7 Lead GP Peer Support Sessions. The Designated Nurse has joined the Safeguarding leads in delivering LAC awareness and question sessions for Lead GP's. This first session was delivered in April 16 which was well attended and evaluation was positive. LAC will now feature as a regular topic area in future support sessions.

## **8. Safeguarding Looked After Children**

- 8.1 Assurance can be given that the Designated Nurse and Doctor complies with level 5 training, all medical advisors and specialist nurses are compliant with level 4 training, Supporting Team Nurse, Health Visitor and School Nurses are compliant at level 3 and all administrative staff compliant with level one.
- 8.2 The Designated Nurse, Doctor, medical advisors and nurses all have access to regular safeguarding supervision. The nurses also receive clinical supervision by the one of the CAMHS Clinical Psychologist for LAC.

## **9. Key Areas for Development for the CCG Designated Nurse 2016/17**

- 9.1 Complete recruitment of the new Designated Doctor for LAC, agree work plan for 2016/17.
- 9.2 Designated Nurse to review and update the CCG LAC work plan, reporting to the Directors, Quality group and Governing Body meetings.
- 9.3 Continue to build partnership joint working with the three local authorities in tracking trends and impact for Looked after children and Care Leavers.

## 9.9

- 9.4 Work with providers to ensure CQC recommendations are implemented and improved service delivery in meeting the needs of LAC & Care Leavers is sustained.
- 9.5 Continue to monitor health provider activity and performance in line with contractual arrangements.
- 9.6 Carry out provider visits to seek assurance that quality assurance of IHA's and RHA's is being completed.
- 9.7 Work with the three local authorities in mapping independent care homes and residential schools across Dorset to identify if unknown LAC placed by other local authorities are resident within the County but have not been notified to the LA's or CCG.
- 9.8 Take a lead in focusing health providers to meet the physical, emotional-wellbeing and mental health needs for LAC transitioning to independence. Where transition to adult health provision is required joint working with the multidisciplinary team around the child will be paramount.
- 9.9 Repeat consultation events with Children and Young People and Care Leavers to gain their views and suggestions for health provision commissioned by Dorset CCG.

**Author's name and Title : Penny Earney Designated Nurse for Looked after Children & Care Leavers**

**Date : 27.6.2016**

**Telephone Number : 01305 213626**

APPENDICES	
Appendix A	For the website only as a background document (follow link below) <a href="#">CCG LAC &amp; CL Annual Health Report 2015/16</a>